




FEE TRANSMITTAL Patent fees are subject to annual revision <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Complete If Known																																																																																																																																																																																																																																																																																								
TOTAL AMOUNT OF PAYMENT (\$) 516		Application Number 10/025,291	Filing Date December 18, 2001																																																																																																																																																																																																																																																																																							
METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account Deposit Account Number 503078 Deposit Account Name Freescale Semiconductor, Inc.		First Named Inventor Thomas K. Johnston	Examiner Name John J. Tabone, Jr.																																																																																																																																																																																																																																																																																							
Attorney Docket No. SC11736TH		Group Art Unit 2133																																																																																																																																																																																																																																																																																								
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Chiu </td> <td style="padding: 5px;"> Registration No. 43,629 </td> <td style="padding: 5px;"> Telephone (512) 898-8838 </td> <td colspan="2" style="padding: 5px;"> Date 8/16/04 </td> </tr> <tr> <td style="padding: 5px;"> Signature  </td> <td colspan="4" style="padding: 5px;"> </td> </tr> </tbody> </table>		Large Entity		Small Entity		Fee Description	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1051	130	2051	65	Surcharge - late filing fee or cash	1052	50	2052	25	Surcharge - late Provisional filing	1053	130	2053	130	Non-English specification	1012	2020	1012	2520	For filing a request for ex parte Reexamination	1804	620*	1804	920*	Requesting publication of SPR prior to Examiner action	1805	1840*	1805	1840*	Requesting publication of SPR after Examiner action	1251	110	2251	65	Extension for reply within first month	1252	420	2252	210	Extension for reply within second month	1253	950	2253	475	Extension for reply within third month	1254	1480	2254	740	Extension for reply within fourth month	1255	2010	2255	1005	Extension for reply within fifth month	1401	330	2401	165	Notice of Appeal	1402	330	2402	165	Filing a brief in support of an appeal	1403	290	2403	145	Request for oral hearing	1451	1510	1451	1510	Petition to institute a public use proceeding	1452	110	2452	65	Petition to revive - unavoidable	1453	1330	2453	665	Petition to revive - unintentional	1501	1330	2501	665	Utility issue fee (or rehearing)	1502	480	2502	240	Design issue fee	1503	940	2503	320	Plant issue fee	1400	130	1400	130	Petitions to the Commissioner	1807	50	1807	50	Processing fee under 37 CFR 1.17(d)	1808	180	1808	180	Submission of IDS	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	1609	770	2609	385	Filing a substantiation after final rejection (37 CFR § 1.129(a))	1610	770	2610	385	For each additional invention to be examined (37 CFR § 1.129(b))	1901	770	2901	385	Request for Continued Examination (RCE)	1902	900	1902	900	Request for expedited examination of a design application	Other fee (specify) _____					SUBTOTAL (3) (\$)					* Reduced by Basic Filing Fee Paid					2. 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Name (Print/Type) Joanna G. Chiu	Registration No. 43,629	Telephone (512) 898-8838	Date 8/16/04																																																																																																																																																																																																																																																																																							
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